Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

BHT 3092 376

		SMALL E		OTHER	THAN							
			(Column 1)		(Column 2)		TYPE		OR	SMALL	ENTITY	
TOTAL CLAIMS			11				RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			/ / _ minus 20=		*8		X\$ 9= ·		OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =				X42=		OR	X84=		
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				+140=		OR	+280=		
*   f	the difference	in column 1 is	less than zero, enter "0" in o			olumn 2	TOTAL	375c	₽ ₽	TOTAL		
CLAIMS AS AMENDED - PART II									-	OTHER	THAN	
		(Column 1)		(Colur		(Column 3)	SMALL	ENTITY	OR	SMALL	14	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=	-	OR	X\$18=		
	Independent	* ENTATION OF MI	Minus	***	E OL AINA	=	X42=		OR	X84=		
╟─	FIRST PRESE	INTATION OF IM	ULTIPLE DE	PENUEN	CLAIM		+140=		OR	+280=		
									OR	TOTAL		
	(0-1,, 4)						ADDIT. FEE	L		ADDIT. FEE		
_		(Column 1) CLAIMS	1	(Colui		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	X42=		OR	X84=		
L	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM				On			
							+140=		OR	+280=		
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)			•	•	2	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA								UH			
*	If the entry in colu	ımn 1 is lees than t	he entry in col	umn 2 weite	e "Ò" in co	lumn 3	+140=	0 0	OR	+280=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
l .	The "Highest Nur	mber Previously Pa	id For" (Total	or Independ	lent) is the	highest number	r found in the ap	propriate bo	x in co	lumn 1.		